

# Expense Report

Town of Nantucket  
16 Broad Street  
Nantucket, MA 02554  
508.228.7255  
508.228.7272 fax

Employee Name: \_\_\_\_\_

Purpose of Travel: \_\_\_\_\_

Dates of Travel: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

## EXPENSES

Day of Travel:							Amount Charged to Town	Amount Paid Out-of-Pocket
Breakfast								
Lunch								
Dinner								
Lodging								
Telephone								
Car Rental								
Taxi								
Parking/Tolls								
Gasoline								
Airfare								
Meeting Fee								
Mileage	Start:	End:	Total Miles _____ x .33 = \$ _____					
Total:								

## DETAIL OF ITEMS CHARGED TO TOWN

Vendor	Invoice #	Amount

Vendor	_____
Warrant Date	_____
Invoice #	_____
Department	_____
Account	_____
Purchase Order	_____
Amount	_____

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Approved By